



CNA Plaza/Chicago, Illinois 60685

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| <input type="checkbox"/> Continental Casualty Company | <input type="checkbox"/> National Fire Insurance Company of Hartford |
| <input type="checkbox"/> Transportation Insurance Company | <input checked="" type="checkbox"/> Transcontinental Insurance Company |
| <input type="checkbox"/> American Casualty Company of Reading, Pa. | <input type="checkbox"/> Valley Forge Insurance Company |

**NOTICE OF CANCELLATION,
NON-RENEWAL, OR REDUCTION IN COVERAGE**

TO:

U.S. ENVIRONMENTAL PROTECTION AGENCY
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10007

POLICY NUMBER: RDX 169 41 11
EPA IDENTIFICATION #NYD096297544

DATE OF MAILING: 11-7-85

☐ AS RESPECTS TO: THE SIGNAL COMPANIES, INC.

This is to notify you that the above numbered insurance policy: (Applicable item marked ☒)

☒ is cancelled effective 4-1-86, at the same time of day the policy became effective. This notice is based on the following grounds: COMPANY ELECTION.

- ☐ is cancelled effective _____, at the same time of day the policy became effective.
- ☐ will not be renewed or continued in force at its expiration date.
- ☐ will not be renewed or continued in force at its expiration for the following reason:
- ☐ will be amended, on renewal, or on the next anniversary date, to provide reduced coverage or limits of liability as follows:

NAME AND ADDRESS OF PRODUCER

E.W. BAIN INSURANCE BROKERAGE, INC.
3130 WILSHIRE BLVD., SUITE #504
LOS ANGELES, CALIFORNIA 90010

Unearned premium (if any) will be refunded as soon as practicable. If the premium has not been paid, a bill for the premium earned to the time of termination will be forwarded in due course.

PLEASE NOTE: If your insurance agent or broker is unable to renew your property coverage in the normal market, you may be eligible for certain basic coverage through a property FAIR Plan, if such Plan is available. Your insurance agent or broker can assist you or you may contact:

(NAME, ADDRESS & TELEPHONE NO. OF FAIR PLAN FACILITY, IF ANY)

To Mortgagee Or Loss Payee:

You are hereby notified that the agreement under the mortgage clause or loss payable clause, which is a part of the above policy, issued to the above insured, is hereby cancelled (or terminated) in accordance with the conditions of the policy, said cancellation (or termination) to be effective on and after the hour and date mentioned above.

NAME AND ADDRESS OF LOSS PAYEES

By 
AUTHORIZED AGENT

DONNA BRADSHAW